

State of Washington Application for a Water Right Please follow the attached instructions to avoid unnecessary delays.

APR 2 4 200

For Ecology Use Fee Paid 10, ° Date 4-24-03

Name Harrison Group				Home Tel: (509) 586 - 9242				
Mailing Address P.O. Box 2818					Work Tel:(
ity Pas	co	State_WA	Zip+4	99302 +	FAX:(_)		
	2. CON as abov		ERSON 7	ΓΟ CALL	ABOUT THE	APPLICATION		
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elationshij	to applica	nt				· · · · · · · · · · · · · · · · · · ·		
Market Services		rement	hardensk skriviter og	alter de amilia (1921) sud	lanice meteorista			
l cubic fee f <u>Irriga</u> SE. (<u>See</u>	t per secon tion instruction	d) from a □ : 1s.) NOTE: A	surface water 1 tax parcel r	source or E ATTA number or a pa	ground water source CH A "LEGAL" l lat number is not su	(gallons per minute of check only one) for the pu DESCRIPTION OF THE Inflicient. See attached map. cre-feet per year	rpose(s) PLACE O	
l Checl	k if the wat	er use is prop	osed for a sh	ort-term proje	ect. Indicate the per	iod of time that the water wi	ll be need	
	From		to	1 /	•			
Section	7.699	ER SOU						
If SURFA	CE WAT	ER			If GROUNDWAT	rer a the salate		
Name the water source and indicate if stream, spring, lake, etc. If unnamed, write "unnamed spring," "unnamed stream," etc.:					A permit is desired for <u>Two</u> well(s).			
Number o	f diversions	S:						
Source flo	ws into (na	me of body o	of water):		Size & depth of well(s): Estimated at 12" by 300 ft deep			
LOCATI	ON				the property of the			
section co	orner: 1) 8	51 ± feet no	rth and 258	6 ± feet west	of the Southeast co	ersion or withdrawal to the orner of Section 21, T9N, F		
¼ of	1⁄4 of	Section	Township	Range(E/W)	County	If location of source is platte below: Lot Block Sub	ed, complete	
	QE.	21	9N	30E	Franklin			
1) SW	SE		1					
		21	ONI	30F	Franklin			
1) SW 2) SW For Ecology	SE	21 Date Receive	9N	30E	Franklin Priority Date: 4	-24/97	4.441(4.185)	

ECY 040-1-14 Rev. 7/97 * * f

APPLICATION

G 330387 Appl. No.:

Sect	ion 5. GENERAL WATER SYSTEM INFORMATION	
A.	Name of system, if named:	
В.	Briefly describe your proposed water system. (See instructions.) Groundwater will be pumped from the proposed wells using pumps that will be connected to a buried pressurized irrigation piping system. Irrigation water will be applied using standard sprinkler systems. The estimated total horsepower of the well pumps is 25.	
C.	Do you already have any water rights or claims associated with this property or system? PROVIDE DOCUMENTATION.	l NO
Committee of the Committee of the	tion 6. DOMESTIC / PUBLIC WATER SUPPLY SYSTEM INFORMATION mpleted for all domestic/public supply uses.)	
A.	Number of "connections" requested: Type of connection (Homes, Apartment, Recreationa	etc.)
В.	Are you within the area of an approved water system? If yes, explain why you are unable to connect to the system. Note: Regional water systems are identified by County Health Department.	OM L
Comp	plete C. and D. only if the proposed water system will have fifteen or more connections.	
C.	Do you have a current water system plan approved by the Washington State Department of Health? If yes, when was it approved? Please attach the current approved version of your plan.	J NO
D.	Do you have an approved conservation plan? If yes, when was it approved? Please attach the current approved version of your plan.	ON [
45000 1790 170 SARES	tion 7. IRRIGATION/AGRICULTURAL/FARM INFORMATION omplete for all irrigation and agriculture uses.)	
A.	Total number of acres to be irrigated:	
В.	List total number of acres for other specified agricultural uses:	
	Use Acres Use Acres Use Acres	
C.	Total number of acres to be covered by this application:17.9	
D.	Family Farm Act (Initiative Measure Number 59, November 3, 1977, as amended by Chapter 237, Laws of Add up the acreage in which you have a controlling interest, including only: ‡ Acreage irrigated under water rights acquired after December 8, 1977; ‡ Acreage proposed to be irrigated under this application; ‡ Acreage proposed to be irrigated under other pending application(s).	2001)
		E 210
	 Is the combined acreage greater than 6000 acres? Do you have a controlling interest in a Family Farm Development Permit? If yes, enter permit no: 	
E.	Farm uses: Stockwater - Total # of animals Animal type (If dairy cattle, see below) Dairy - # Milking # Non-milking	

Section 8. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water?

☐ YES ☑NO

NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point, and some portion of the storage will be above grade, you must also apply for a reservoir permit. You can get a reservoir permit application from the Department of Ecology.

Section 9. DRIVING DIRECTIONS

Provide detailed driving instructions to the project site.

Heading eastbound along US Highway 395 / SR 12, take the East Lewis Street exit and travel west 0.5 miles, turn right on South Elm Avenue and travel north 0.6 miles, turn right on East Highland Street and travel east 0.2 miles to North Cedar Avenue.

Section 10. REQUIRED MAP

A. Attach a map of the project. (See instructions.) See attached map.

Section 11. PROPERTY OWNERSHIP

Does the applicant own the land on which the water will be used? If no, explain the applicant's interest in the place of use and provide the name(s) and address(es	■YES □ Notes) of the owner(s)	
			_
Door the applicant own the land on which the water gauges is leasted?		MVEC EL	10
Does the applicant own the land on which the water source is located? If no, submit a copy of agreement:		⊠YES □ N	10
		-	

I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though I may have been assisted in the preparation of the above application by the employees of the Department of Ecology, all responsibility for the accuracy of the information rests with me.

Applicant (or authorized representative)

Date

CAME

Landowner for place of use (if same as applicant, write "same")

Date



Use this page to number before a	 answers to any	questions on t	he application.	Please indicate section	

We are returning your application for the following reaso	n(s);	
Examination fee was not enclosed		APPLICANT PLEASE RETURN TO CASHIER, PO BOX 5128, LACEY, WA 98509-5128
Section number(s)incomplete	is/are	APPLICANT PLEASE RETURN TO THE APPROPRIATE REGIONAL OFFICE
Explanation:		
Please provide the additional information requested abo (date).		pplication by
Ecology staff	Date	

Ecology is an Equal Opportunity and Affirmative Action employer.

To receive this document in alternative format, contact the Water Resources Program at (360) 407-6604 (Voice) or (360) 407-6006 (TDD).